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PTO/SB25 (09-04)
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Under the Papersont Reduction Act of 1995, no parsons are required to respond to a collection of information unless it displays a valid CMB control number. Cocket Number (Optional) TERMINAL DISCLAIMER TO OBVIATE A DOUBLE PATENTING **REJECTION OVER A "PRIOR" PATENT** A02P1013U801 in re Application of . Mark W. Kroll 10/071,282 Application No.: 02/07/2002 Fliat SYSTEM AND METHOD FOR EVALUATING RISK OF MORTALITY DUE TO For. Congestive heart failure using physiologic sensors In making the above discissmer, the owner does not discissin the terminal part of the term of any patent granted on the instant application that would extend to the superation date of the full statutory term as defined in SS U.S.C. 154 and 173 of the prior patent, "as the term of each prior patent is precently shortened by any terminal discissmer," in the event that each prior patent taxes: expires for failure to pay a maintenance fee; to held unenforceable; is found invalid by a court of competent jurisdiction; is statutorily discisimed in whole or terminally discisimed under 37 CFR 1.921; has all claims canceled by a reexamination certificate; in relasued; or is in any matter terminated prior to the expiration of its full statutory term as presently shortened by any terminal disclaimer. Check either box 1 or 2 below, if appropriate. For submissions on behalf of a businessionganization (e.g., corporation, partnership, university, government agency, etc.), the undensigned is empowered to act on behalf of the businessionganization. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are purishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false attements may jacpardize the validity of the application or any patent issued thereon. 2. LXK The undersigned is an attorney or agent of record. Reg. No. 43,179 Ronald S. Tamura, Attorney for Applicant(s) Typed or printed name 818/493-3157 Telephone Number Terminal discisioner fee under 37 CFR 1.20(d) included. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and sutherization on PTO-2038. "Statument under 37 CFR 3.73(b) is required if terminal disclaimer is signed by the assignee (owner). Form PTO/SB/96 may be used for making this certification. See MPEP § 324. This collection of information is required by 37 CFR 1.321. The information is required to obtain or relate a benefit by the public which is to the land by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 information to complete, training gathering, property, and submitting the completed application form to the USPTO. Time will vary depending upon the training case. Any comments of the smotest of time you require to complete this form end/or suggestions for reducing this bandon, about to one Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandrin, VA 22313-1450. DO NOT SEND TO Commissions for Palanta, P.O. Box 1450, Alexandria, VA 22313-1460. 05/18/2005 FFIELDS 00000001 160068

PAGE 3/3 " RCVD AT 5/12/2005 12:43:22 PM [Eastern Daylight Time] " SVR:USPTO-EFXRF-1/0 " DNIS:8729305 " CSID:818 362 4795 " DURATION (mm-ss):01-22

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Mark W. Kroll et al.

Serial No.:

10/071,282

Examiner:

M. Bockelman

Filed:

02/07/2002

Art Unit:

3762

Docket No.:

A02P1013US01

For:

SYSTEM AND METHOD FOR EVALUATING RISK OF MORTALITY DUE

TO CONGESTIVE HEART FAILURE USING PHYSIOLOGIC SENSORS

TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir.

Submitted herewith for filing are the following documents:

Amendment and Request for Reconsideration

Transmittal Letter, Fee and Cert. of Mailing

TEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE	\$ FEE
A	TOTAL CLAIMS FEE	6	24	0	X \$ 50	\$ 0
8	INDEPENDENT CLAIMS FEET	3	3	0	X \$200	. 0
С	MULTIPLE- DEPENDENT				X \$ 360	0
D	EXTENSION OF TIME FEE — 1-man: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160					0
E	ADDITIONAL FEES (i.e., Surcharge – Late Fee- Declaration; Petitions: Information Disclosure Statement: Terminal Disclaimer, etc.)					130
	Specify: Terminal Disclaimer					
F	TOTAL ADDITION	ONAL FEE (ADD	TOTALS FOR LINES A,	ALS FOR LINES A,B,C,D, and E)		

X

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the amount of

\$130**

enclosed.

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